



February 6, 2015

Dr. Karen DeSalvo  
National Coordinator for Health Information Technology  
Office of the National Coordinator for Health Information Technology  
Hubert H. Humphrey Building  
200 Independence Avenue SW  
Washington, DC 20201

**RE: Federal Health IT Strategic Plan 2015-2020**

Dear Dr. DeSalvo:

I am writing on behalf of the Alliance for Home Health Quality and Innovation (the “Alliance”) with regard to the request for public comment on the **Federal Health IT Strategic Plan 2015-2020**<sup>1</sup>. The Alliance appreciates the opportunity to provide comments the proposed strategic plan.

**About the Alliance for Home Health Quality and Innovation**

The Alliance is a non-profit 501(c)(3) organization with the mission to lead and support research and education on the value of home health care to patients and the U.S. health care system. Working with researchers, key experts and thought leaders, and providers across the spectrum of care, we strive to foster solutions that will improve health care in America. We are also a membership based organization comprised of not-for-profit and proprietary home health care providers and other organizations dedicated to improving patient care and the nation’s healthcare system. For more information about our organization, please visit:

<http://ahhqi.org/>.

The Alliance supports the direction of the strategic plan and commends the Office of the National Coordinator for Health IT’s (ONC’s) effort in mapping a plan to further advance health IT, including telehealth and mobile health, promote patient safety, and drive interoperability. Through the strategic plan, ONC is placing a high-importance on furthering health IT, especially with regard to patient safety and interoperability. As the healthcare landscape progresses, health IT—including electronic health records (EHR), telehealth, and mobile health—will become critical in the delivery of high-quality, lower-cost care. Home health acts a critical convener of care, especially for older Americans, and health IT plays a large role in shaping the future of care delivery. The Alliance supports the goals contained

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<sup>1</sup> Office of the National Coordination Federal Health IT Strategic Plan 2015-2020, 79 Fed. Reg. 72760 (Dec. 2014) <http://www.healthit.gov/sites/default/files/federal-healthIT-strategic-plan-2014.pdf>

within the strategic plan and appreciates the focus on health IT as a means of better collecting, sharing, and using health information.

Specifically, the idea of a shared *Nationwide Interoperability Roadmap* is critical to providing high-level care to patients regardless of where they are treated in the continuum. The Alliance supports efforts to increase interoperability, especially between acute and long-term and post-acute care (“LTPAC”) providers, and agrees that interoperability is a key to achieving the framework laid out by ONC.

Although the Alliance supports the overall plan, the following are key considerations for ONC’s implementation of the plan: (I) greater incentives are needed for implementing interoperable systems; and (II) greater clarity on the role of individual provider groups, such as home health, is needed to achieve optimal adoption.

**I. Further consideration should be given to providing incentives to drive adoption of health IT and achieve health information exchange.**

Given the current economic climate, the Alliance understands that private markets will have to play a crucial role in the continued development of an optimized federal health IT infrastructure. However, to the extent that there exists the opportunity to use policy levers as a means of incentivizing adoption, the Alliance recommends use of those levers as long as they do not present undue burden. For example, in the context of the meaningful use program, the Alliance recommends that meaningful use providers be required to exchange health information with increasing numbers of LTPAC providers. Requiring hospitals and physicians to achieve interoperable health information exchange with LTPAC providers, will serve as a significant means of advancing towards ONC’s goals. The Alliance also appreciates the sentiment in Objective 1B, which addresses undue financial burden to adapt to changing products, systems, and services, and would like to see the financial burden of implementation addressed as well.

Another possible means of incentivizing interoperability is to incorporate health IT-related requirements in the Medicare Shared Savings Program (“ACO proposed rule”).<sup>2</sup> The ACO proposed rule already would have ACOs explain how partnerships with LTPAC providers would help to advance health information exchange with these providers. This is a step in the right direction. CMS could further require that ACOs adopt HIT systems that are interoperable with LTPAC provider systems, consistent with the standard data elements that are being developed by ONC and standards development bodies. Although such a requirement would be a significant change, it could be staged to enable implementation over an appropriate period of time. Similar requirements in other CMS demonstrations, pilots and programs would also have the effect of advancing the adoption of interoperable health IT.

In conclusion, the Alliance supports the exploration of further policy levers that can facilitate adoption of health IT and achievement of interoperability, as well as means to alleviate the financial burden caused by increased health IT adoption.

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<sup>2</sup> Medicare Shared Savings Program, Proposed Rule, 79 Fed. Reg. 72760 (Dec. 8, 2014).

**II. Additionally, while the Alliance appreciates the inclusion of home health as one the broadly termed “providers,” given the differences among health care providers and professionals, further guidance on the expectations of home health agencies would be helpful in pursuing the goals articulated in the health IT strategic plan.**

The Alliance recommends that ONC provide more detail related to its specific plans to make progress against the goal of interoperability for LTPAC providers in relation to the rest of the health care system. With an aging population and a shifting focus of care to communities and the home, home health is poised to be a key convener of care in the future of health care delivery. As such, the Alliance recommends further fleshing out the expectations of home health care providers with regard to health IT. With home health as a locus of care in the future, and an increase in use of telehealth and mobile health, there will be a heightened need for strategic direction that is specific to home health care.

As stated in the Alliance’s comments last year to ONC on voluntary EHR certification, the Alliance supports developing EHR certification standards. Making interoperability a certification standard would make this critical functionality the norm, rather than a seemingly unattainable exception. The Alliance’s extended comments can be found on the Alliance’s website and are available for public perusal.<sup>3</sup> These are just a limited set of recommendations for ONC that would be specific to LTPAC providers. The Alliance recommends that ONC consider its options comprehensively and provide specific steps that it is interested in taking to advance towards interoperability in a fashion that includes LTPAC providers.

Furthermore, the Alliance supports the intent addressed in Goal 3 to strengthen health care delivery, and feels that home health is one area that will play a critical role in future delivery models. In the fall of 2014, the Alliance sponsored a workshop with the Institute of Medicine and National Research Council on the future of home health care. During the workshop, a number of new innovations and models of care were addressed, including those that emphasized telehealth and mobile health as critical tools. For example, a presentation by Eric Dishman of Intel-GE focused on developing solutions that empower professionals, patients, and caregivers to provide the care patients need and want with a focus on providing that care in the home.<sup>4</sup> Innovative models, including those discussed by Mr. Dishman, are beginning to utilize health IT as a key enabler to provide greater quality of care to patients at reduced cost to the health care system.

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The Alliance is appreciative of the efforts made by ONC to focus the goals of health IT for a changing health care landscape on the expansion of adoption and interoperability, patient well-being and safety, and improved care delivery.

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<sup>3</sup> Alliance for Home Health Quality and Innovation: Request for Public Comment on Voluntary 2015 Edition Electronic Health Record (EHR) Certification (April 28, 2014)

[http://ahhqi.org/images/uploads/Alliance\\_Response\\_to\\_ONC\\_on\\_Certification\\_v042814\\_WEB.pdf](http://ahhqi.org/images/uploads/Alliance_Response_to_ONC_on_Certification_v042814_WEB.pdf)

<sup>4</sup> Eric Dishman, Toward Personal Health: Going Home and Beyond (Oct. 1, 2014)

<http://www.iom.edu/Activities/Aging/FutureHomeHealthCare/2014-SEP-30/Day-2/Overview/34-Dishman-Video.aspx>

In conclusion, ONC's focus should be on the long-term goal of achieving seamless health information exchange across the spectrum of care, which includes home health care and other LTPAC providers. By using policy levers that will advance the ability to effect the exchange of standardized health information among hospitals and eligible professionals and LTPAC providers, we will support dramatic improvements in quality and efficiency of care.

Thank you again for the opportunity to comment. Should you have any questions about the Alliance's comments, please contact me at (202) 239-3671 or [tlee@ahhqj.org](mailto:tlee@ahhqj.org).

Sincerely,

A handwritten signature in black ink, appearing to read "T.L. Lee".

Teresa L. Lee, JD, MPH  
Executive Director